

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th, Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

IA ETHICS AND
CAMPAIGN DISCLOSURE BD.
2009 OCT 27 PM 12:44

COMMITTEE NAME (Must be same as on Statement of Organization)

Ken Bresnan For Mayor

IMPORTANT: Indicate by # type of committee you are reporting, for: ☐

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Ken Bresnan

Political Party (if applicable)

NA

Office Sought
Mayor of Indianola

District (if Senate or House)
NA 10/29/2009

FORM DR-2 (Rev. 07/2007)	DISCLOSURE REPORT
For Office Use Only	
Comm. # _____	
Logged In _____	
Scanned _____	
Computer _____	
Audited _____	

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Ken Bresnan
SIGNATURE OF PERSON FILING REPORT

515 961 0641
TELEPHONE

10/27/2009
DATE SIGNED

I AM FILING A 10/29/2009

(report date)

REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

Indicate by # ☒ 1

☐ CHECK IF AMENDMENT TO REPORT DATED NA

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election
NA 11.3.09
County & Local Committees, enter County in
which Election is held
NA WARREN

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

0.00

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below)

935.00

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$

935.00

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

874.40

Schedule F: Loan Repayments total (Attach Schedule F)

60.60

CASH ON HAND at the end of this reporting period (If final report balance must be zero)

**UNPAID BILLS (From Schedule D - Attach Schedule D)

0.00

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

200.00

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Ken Bresnan for Mayor

SCHEDULE A (Rev. 07/03)	MONEY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
10/1/2009	ID# CK#	Staci Appel 10901 180th Ave Ackworth, Iowa 5001		\$100.00	<input type="checkbox"/>
10/1/2009	ID# CK#	Regina Glover 202 N. Parish Carbondale, IL 62901	Sister	50.00	<input type="checkbox"/>
10/1/2009	ID# CK#	Steve Witt 1817 Sunset Grinnell, IA 50012		100.00	<input type="checkbox"/>
10/5/2009	ID# CK#	Jack Bean 200 N. H Indianola, IA 50125		100.00	<input type="checkbox"/>
10/6/2009	ID# CK#	Bob & Susie King 801 W. Ashland Indianola, IA 50125		100.00	<input type="checkbox"/>
10/8/2009	ID# CK#	Margo Thomas 808 Robin Glen Indianola, IA 50125		50.00	<input type="checkbox"/>
10/8/2009	ID# CK#	Kim Abild 1312 E. Euclid Indianola, IA 50125		50.00	<input type="checkbox"/>
10/15/2009	ID# CK#	Tricia Martin 1505 W. Jackson ave Indianola, IA 50125		100.00	<input type="checkbox"/>
10/15/2009	ID# CK#	John & Ann Williams 1501 N. B Indianola, Ia 50125		100.00	<input type="checkbox"/>
10/24/2009	ID# CK#	Unitemized Contributions		185.00	<input type="checkbox"/>

SUB-TOTAL

\$ 935.00

TOTAL (If last page of this schedule)

\$ 935.00

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Ken Bresnan for Mayor

DATE EXPENDED (MM/DD/YY)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/19/2004	ID# CK#	Mark French 1112 boyd Des Moines, IA 50125	Domain Registration Fee	\$ 66.00
10/20/2009	ID# CK#	Indianola Record herald 112 N. Howard Indianola, Iowa 50125	Newspapper Ad	96.30
10/23/2009	ID# CK#	Edge Technologies 1005 S. Jefferson Indianola, Iowa 50125	Yard signs, brochures	686.35
10/23/2009	ID# CK#	Circle B Lumbar Yard Hwy 69 North Indianola, Iowa 50125	Lath, Staples	25.75
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 874.40
TOTAL (If last page of this schedule)				\$ 874.40

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(f).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Ken Bresnan for Mayor

SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YY)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
10/24/2009	Mark French 1112 Boyd St. Des Moines Iowa 50125	Brother in Law	Web page assembly	\$ 200.00	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$ 200.00	
TOTAL (if last page of this schedule)				\$ 200.00	

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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